PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

010369

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	ITITY	OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			38				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			30 min	us 20=	· /	8	Ī	X\$ 9=	7	OR	X\$18=	184
INDEPENDENT CLAIMS			6 minus 3 = 3			3	Ī	X40=	/	OR	X80=	240
MULTIPLE DEPENDENT CLAIM PRESENT							ľ	+135=		OR	+270=	270
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	L	TOTAL		OR	TOTAL	1400
CLAIMS AS AMENDED - PART II								CARALL -	:NIT!T\		OTHER SMALL	
(Column 1)			اعتبيرس	(Colur		(Column 3)	r	SMALLE		OR I	SIVIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	į	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	ſ	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	'ENDEN	CLAIM		ţ	+135=		OR	+270=	
								TOTAL		اما	TOTAL	
		(O-1: C)	A	ADDIT. FEE		ION.	ADDIT. FEE					
	·	(Column 1) CLAIMS			mn 2) HEST	(Column 3)	ŗ		ADDI	1 1		ADDI-
AMENDMENT B	!	REMAINING AFTER AMENDMENT	3. * 	NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	ſ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>	t	X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN.	T CLAIM		ŀ	.405		1	, 270	1
•								+135=		OR	+270=	
			A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	<u></u>				
	P	(Column 1)			mn 2)	(Column 3)				_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	 	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ		ļ	1		
	MAL.		the arts ?	ima C · · ·	o #0" t-	aluma 2		+135=		OR	+270=	
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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